

## PREPARING FOR SURGERY

Please note: Your safety during surgery requires that you disclose ALL medications, vitamins, supplements, substances, and drugs (recreational or otherwise) that you regularly take. Your health and well-being is our top priority. Please disclose any and all past and current medical conditions and all previous surgeries to the nurse during your medical evaluation.

- 1. You will need a prescription for nasal topical ointment MUPIROCIN OINTMENT 2% that you MUST use 5 days before surgery. You are to use a Q-tip and gently apply the ointment inside both of your nostrils twice a day for 5 days before surgery. This will reduce your risk of an MRSA infection. Your provider should be able to prescribe this medication for you.
- 2. Please incorporate HIBICLENS (chlorhexidine) antibacterial soap into your shower routine 5 days prior to surgery. You may purchase at any local pharmacy, Walgreen's, CVS, Target. You will wash with this soap as a final step in your showering routine, leave on for a few minutes, then rinse thoroughly. Please discontinue the use of Hibiclens or any antibacterial wash AFTER surgery, moving forward, you will only use a gentle wash, for example Dove for sensitive skin.
- 3. **In addition, we HIGHLY recommended taking PRO-STAT.** This is a sugar free liquid gel that provides 15 grams of protein and 100 calories in a single fl oz. It is recommended to be taken twice daily 1 week prior to surgery and 3 weeks post- surgery for enhanced recovery and improved wound healing.
- 4. **DO NOT** take Ibuprofen, Excedrin, Alka Seltzer, Aspirin, Aspirin-containing products, Naproxen, Aleve, Motrin, Midol, Ibuprofen, Advil or any NSAID-type medication <u>3 weeks prior to surgery and 2 weeks after surgery</u>.
  - NSAID medications cause bleeding which may result in complications during and after surgery.
  - You may take Tylenol for the 3 weeks prior to surgery, as an alternative to the above medications.
- 5. **DISCONTINUE** Vitamin E, Fish Oil (DHA/EPA,) high dose multi-vitamins, weight loss supplements, antioxidants, green tea products, Bromalin, or any other "natural" vitamins and herbal medications <u>4 weeks before and 4 weeks after surgery</u>. Some examples include: Gingko Biloba, St. John's Wort, Ginseng, Dong Quai, Echinacea, Valerian, Yohimbe, Ma Huang, etc. These supplements and herbals may cause excess bleeding during surgery.
- 6. Discontinue WEIGHT LOSS MEDICATIONS. You will need to discontinue any weight lost medication such as WEGOVY, TIRZEPATIDE, OZEMPIC, MOUNJARO, ZEPBOUND, SEMAGLUTIDE OR ANY GLP-1 medication 4 weeks prior to surgery. Failure to discontinuing these medications can increase your risk of aspiration during surgery which can result in a medical emergency.
- 7. We strongly recommend commencing the below iron regimen a minimum of **two months** prior to completing your preoperative bloodwork to support hemoglobin levels prior to and after surgery. You should continue this regimen through your surgery date and during your initial recuperation period. *If you*

have a history of Anemia, it is highly recommended to have your Hemoglobin levels checked immediately to give you ample time to increase your levels and avoid a surgery cancellation.

- a. **Iron Regimen:** Floradix or Hema Plex, Vit C 500 mg, Folic Acid 400 mcg twice a day. Please begin adding this iron/hemoglobin fortifying regimen to your daily routine. Patients frequently exhibit low hemoglobin levels on their preoperative bloodwork, which results in surgery rescheduling and delays until levels are within acceptable range. The iron regimen **also fortifies your reserves and will support your body's healing and recuperation.**
- 8. Discontinue any stimulant medications, appetite suppressants or any "workout" or "pre-workout" supplements **for 4 weeks prior to and 4 weeks after surgery**. Examples include pre-workout stimulant and energy drinks, creatine powders, ephedrine, or any other "weight loss" regimens. Please also discontinue any herbal teas or drinks during this time.

IF YOU ARE USING ANY MEDICATIONS CONTAINING PHENTERMINE YOU MUST DISCONTINUE 6 WEEKS PRIOR TO SURGERY. (THIS ALSO INCLUDES ADDERRAL). A POSITIVE DRUG TEST WILL INTERFERE WITH YOUR SCHEDULED SURGERY AND YOU WILL BE RESCHEDULED/CANCELLED. IF YOU ARE TAKING ANY WEIGHT LOSS SUPPLEMENT, PLEASE LET THE MEDICAL STAFF KNOW. THE MORNING OF YOUR SURGERY, A URINE SAMPLE WILL BE TAKEN FOR THE FOLLOWING: PREGNANCY, NICOTINE AND A 12 LEAD DRUG TEST

- 9. Discontinue the use of any oral contraception and or hormone replacements **one month** prior to surgery to avoid risk of blood clots. You will be able to restart your oral contraception and hormone therapy **one month** after surgery. Contraception and hormones increase the risk of a blood clot which can lead to death.
- 10. **SMOKING** and /or the use of recreational and unauthorized drugs and medications will jeopardize the results of your operation. SMOKING will impede wound healing and contributes to widened, raised, and thickened scars, skin necrosis (death of cells in the living tissue,) blood clots and other detrimental complications. **Please stop smoking any products containing nicotine (this includes hookah, vaping, cigarettes, etc.) 6 weeks before and 6 weeks after surgery.** A positive result on your pre-operative appointment date, and/or the morning of your surgery for nicotine and/or ANY drugs will result in surgery cancellation without reimbursement of your surgery payments.
- 11. Discontinue consumption of alcoholic beverages **two weeks** prior to surgery and after your surgery.
- 12. Please complete preoperative lab work (blood panels) and any required imaging (EKG, Chest X-ray, etc.) on a date that falls **within 60 days** of your surgery and not outside of this window of time. You will be asked to obtain a letter of medical clearance from your primary care physician, along with these exams. For example, if your surgery falls on July 1<sup>st</sup>, you may complete your clearance requirements any day after May 1<sup>st</sup>. Please try to schedule your appointment with your provider as early as the first day of the 60-day window to avoid any delays in receiving your results.
- 13. Breast surgery patients ages 35-39 will need a current breast ultrasound, patients ages 40 or over will need a current mammogram.
- 14. All patient 40 and above will require a chest x ray.
- 15. Patients over 50 will require an additional clearance from their cardiologist even if you have no cardiac conditions.
- 16. If you are currently under the care of a specialist such as a pulmonologist, hematologist, or rheumatologist, you will also need a letter of clearance from the physician.

- 17. For breast ultrasound, mammogram, and chest x ray, these exams will be valid for one year from your surgical date.
- 18. Please avoid any dental procedure, one month before and one month after surgery.
- 19. Please avoid any Vaccines one month before and one month after surgery
- 20. Please make sure that you remove nail polish from both index finger prior to surgery, this includes acrylics, gel or even clear nail polish.
- 21. Avoid shaving or waxing 1 week prior to surgery, this is to avoid any possible in grown hair that may cause an infection. You can use an electric shaver to trim your hair.
- 22. All your lab and imaging results are due to our office via email or fax **two weeks** prior to your surgery date. This is to avoid any delays in your surgery in the case that additional testing is required. **Labs that are not received within the time frame indicated are at risk for a rescheduling/cancellation fee in the case that any exams received at the last moment are abnormal leaving no time to follow up.**
- 23. **COVID PCR** test results are due to our office via email or fax no later than **48 hours** prior to surgery, with a collection date of a maximum of **14 days** prior to your day of surgery. It is recommended to have this test done at the 14-day mark from your surgery to avoid any delays in receiving your results on time. Example, if you are scheduled for July 14, you should get tested on July 1<sup>st</sup>. **Please be advise that we do not accept antibodies or antigens testing, only PCR.**
- 24. Please contact our office before surgery if you develop any symptoms of flu, virus, or infection. These symptoms may include burning upon urination, urinary frequency/urgency, fever, coughing, sneezing, runny nose, chest congestion, sinus/ear pressure, diarrhea, nausea, vomiting or abdominal pain.
- 25. Your preoperative appointment is scheduled for you in our office with the Nurse and must be completed one full day prior to surgery.
- 26. **WEIGHT GAIN** will increase your complication risks during and after surgery and will contribute to a less than favorable aesthetic result. Ideally a BMI under 30 is recommended. If you experience significant weight gain (placing you over 32 Body Mass Index) after you were evaluated and/or if you have a planned, upcoming procedure with us, please notify our office immediately to avoid surgery cancellation or postponement. Please know that the requirements for having your surgical procedure in office must be under 32. BMI above 32 will require their surgery to be done in the hospital with an overnight stay. (Prices will change)
- 27. Please consume an adequate amount of water (**3 liters**) during the days leading up to your surgery. This will improve your hydration and improve your recovery experience after surgery. Continue to hydrate yourself during your recovery (Water is your best friend). Please avoid heavy meals prior to surgery to avoid any bloating or constipation. There is no strict diet after surgery, you can eat as tolerated. It is recommended soft, bland meals for the first 1-2 days after surgery to avoid any discomfort.
- 28. You will receive your **PRESCRIPTIONS** the day of your preoperative appointment in person the day before your scheduled surgery with the **NURSE**. It is imperative to drop off your prescriptions that same day to assure you have them filled prior to the morning of surgery. Please remember that the only other pain medication you can take aside your prescribed medication is **TYLENOL** over the counter (as long as it is not taken with Percocet). *Your pain medication (oxycodone/acetaminophen) and Tylenol are NEVER to be taken together!*
- 29. It is very common to experience constipation, it is recommended to purchase Colace/Senna/Miralax/Milk of Magnesia, a stool softer to start taking a few days after surgery if you are having trouble going. You can

- also incorporate FIBER a well balance meal and fluids to assist with the Digestion system. An enema or a visit to your doctor would be the last resort.
- 30. Recommended Post-Operative Supplies: (*Please note all these supplies may not apply to your procedure.*Please note they are recommendations and only serve as a guide to help patients prepare for surgery. If you have any questions in regard to supplies, please contact the office.)
  - Gauze
  - ABD Pads
  - Chux (Disposable Underpads, or puppy training pads)
  - Tape
  - Dove Sensitive Soap
  - Impermeable Drapes or Sheets (You can even buy shower curtain liners to drape on surfaces, in case you are draining after your procedure)
  - Extra towels, sheets, or pillows if you are staying in a hotel/Airbnb
  - Stool softeners (such as Colace) or Laxatives (such as Miralax)
  - Seamless tanktops \*\*For Abdominoplasty or Liposuction/BBL procedures\*\*
  - Large and loose dresses (Preferably with a zipper in the front for easy dressing)
  - Extra Strength Tylenol
  - Silagen Scar Gel or Sheeting (Sold in the office)
  - Foam Pads (Sold in office) \*\*For Abdominoplasty or Liposuction/BBL procedures\*\*
  - Iron Regimen (Hemaplex or Floradix, Vitaminc C, Folic Acid)
  - Pro-Stat Protein Supplement
- 31. Anesthesia: Please note that our nurses in the recovery room will be taking excellent care of you during your post anesthesia recovery. It is important to note that the time spent during the anesthesia recovery process varies per patient. As a AAAASF certified ambulatory surgical facility we take great pride in taking care of our patients in the recovery room area as long as is necessary for their safety. Once awakening from anesthesia, you will lose all track of time and you will not be able to know how long you have been in recovery. Our nurses alongside our anesthesia staff will ensure that you are safe to be discharged. This does not mean that you will be discharged once all of your pain is completely resolved or that you are feeling exactly as you felt before receiving anesthesia. Regardless of the time in recovery you will still have pain related to your operation and you will still feel lethargic from the effects of anesthesia. These issues resolve over the following 24 hours after the operation. We will ensure a proper and safe discharge once you meet all of the required criteria from a medical standpoint. We look forward to serving you and we thank you for choosing Zuri Plastic Surgery.
- 32. **PLEASE NOTIFY OUR PREOP DEPARTMENT ASAP** if you currently have or have ever had any of the below medical conditions:
  - a. Autoimmune Disorders: Lupus, Rheumatoid Arthritis
  - b. Sleep Apnea
  - c. Anemia or Blood Disorders (low hemoglobin levels, sickle cell anemia, platelet disorder, etc.)
    d. DVT (blood clots)
  - e. Pulmonary (COPD)

. Hypertension (High Blood Pressure)
. Excessive / Disruptive Snoring
Asthma
Thyroid disease
. Heart Disease (abnormal rhythm, mitral valve prolapse, prior heart attack)
ASE ADVISE OUR PREOP DEPARTMENT ASAP if you have taken or are currently taking any e below medications:
Oral Contraceptives
. Hormone Replacement Therapy (Estrogen)
Phentermine or Phen-Fen
. Adderall
Accutane
Steroids / Human Growth Hormone
. Immunosuppressive Drugs
Blood Thinners (coumadin, Xarelto, heparin, advil, aleve, naproxyn, Excedrin, etc)
Methadone

f. Diabetes